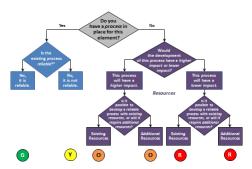
SAMHSA-HRSA CENTER for INTEGRATED HEALTH SOLUTIONS Discussion of BHICA Results Mid-Atlantic Regional Meeting August 18, 2015	
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Purpose	
To discuss common issues that arose from the BHICA results.	
To address these issues using TTA goals from quarterly and any additional new goals.	
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Description of the Behavioral Health Integration Capacity Assessment (BHICA)	
Evaluates behavioral health organizations in their ability to implement fully integrated care	
Examines each of three potential approaches: coordinated care, co-locate, build capacity in-house	
Inform Training and Technical Assistance (TTA) goals	
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The majority	of BHICA	items	are	coded
into 4 catego	ries:			



BHICA Categories:

Green

There is a process in place and it is reliable

Yellov

There is a process in place and it is not reliable

Orange

There is no a process in place and it will have a higher impact

Red

There is no process in place and it will have a lower impact

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BHICA Results

53 of 72 agencies completed the BHICA

5 agencies in the Midatlantic region completed the BHICA

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BHICA Discussion By Section	
Section 2: Assessing Your Infrastructure	
Section 3: Screening and Identification of Population	
Section 4: Assessing Optimal Integration	
Section 5: Financing Integration	
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Section 2.1: Capacity to Collect Data, Exchange Information and Monitor Population Health	
The highest and lowest percent of green responses:	
generating clinical care and recovery oriented service reports for each	
Does your EHR meet Stage 1 meaningful use criteria?	
use an electronic health record (EHR)?	
record number of past-year ER visits for psychiatric and medical reasons?	
participating in a secure, shared electronic messaging service?	
Is your EHR able to interface with other systems outside of the organization? 0%	
Section 2.2: Progress and Outcome Tracking	
The highest and lowest percent of green responses:	
track individual changes in substance abuse behaviors?	
track lab work?	
track medication fills?	
track individual changes in health outcomes?	
use the data it collects to assess how it is doing with care delivery?	
track individual changes in health behaviors?	



Section 4.1: Care Cod	ordination		
The highest and lowest perce	ent of green responses:	•	
have an informed consent process?	100%	-	_
talk with individuals about the release of their information when making a referral?	100%		
refer individuals to primary care providers?	100%		
consistently track progress related to an individual's medical needs?	25%		
track which individuals successfully make it to their referred appointment?	25%		
Do providers contact local primary care providers for advice about treating an	25%		
individual?			
	-location and In-House		
Primary Care			
The highest and lowest perce	nt of green responses:		
Do providers communicate about diagnoses with each other?	100%		
screen for substance abuse/illicit drug use?	100%	-	
Is there someone that assists individuals in managing medical conditions, psychosocial problems more effectively?	100%		
Do BH and PC providers contribute to a shared care and treatment plan?	50%		
offer on-site pharmacy services?	0%		
Do BH and PC providers meet regularly?	0%		
Section 5: Financing	g Integration		
The highest and lowest perce	ent of green responses:		
Are the costs of the integrated care program known, tracked?	90%		
participate in non-billable activities?	85%		
identify a funding stream for each integration-related billable activity?	84%		
collect use of acute care services to show a decrease in health care costs?	62%		
engaged with payers in related demonstrations?	59%		
have a relationship with a health system participating in an ACO?	46%		

Meet as a Team	
What resonated with you?	
What ideas do you hope to implement?	
Which other organizations are doing something that you want to replicate?	
Did the conversation inspire you to add a new TTA goal?	
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Whole-Group Discussion	-
What resonated with your team?	
What ideas does your team hope to implement?	
Which other organizations are doing something that your team wants to replicate?	
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